



Missouri Ethics Commission  
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. A101422

1. DATE OF REPORT  4/15/2011	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE CITIZENS FOR A STRONGER ST LOUIS	
3. COMMITTEE MAILING ADDRESS PO BOX 39414	4. COMMITTEE TELEPHONE NUMBER  (314) 259-1234
CITY / STATE / ZIP ST LOUIS MO 63139-8414	
5. TREASURER'S NAME JOSH BOWLIN	
6. TREASURER'S MAILING ADDRESS PO BOX 39414	7. TREASURER'S TELEPHONE NUMBER HOME:  WORK: (314) 644-3824
CITY / STATE / ZIP ST LOUIS MO 63139-8414	
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER BRADLEY J KETCHER	
9. DEPUTY TREASURER'S MAILING ADDRESS PO BOX 39414 ST LOUIS MO 63139-8414	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME:  WORK: (314) 259-1234
CITY / STATE / ZIP	
11. DATE OF ELECTION 4/5/2011	12. TYPE OF ELECTION ( CHECK ONE ) <input type="radio"/> PRIMARY <input checked="" type="radio"/> GENERAL <input type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 3/25/2011 THROUGH 3/31/2011	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY        <input type="checkbox"/> CHECK IF INCUMBENT  <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input type="checkbox"/>	15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input checked="" type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input checked="" type="checkbox"/> Apr 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input type="checkbox"/> 8 DAYS BEFORE <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input type="checkbox"/> OTHER <input type="checkbox"/> AMENDING PREVIOUS REPORT DATED _____, 20____
	16. COMMITTEE TREASURER'S SIGNATURE  I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.  ELECTRONICALLY FILED Apr 15 2011 8:56AM _____ TREASURER'S SIGNATURE



# Missouri Ethics Commission

## REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
CITIZENS FOR A STRONGER ST LOUIS	4/15/2011	

Receipts		A. This Period	B. This Calendar Yr or Election Cycle	Statement of Beginning and Ending Financial Condition	
1. Total Receipts For This Election Previously Reported			\$ 657,260.00		
2. All Monetary Contributions Received This Period		\$ 25.00			
3. All Loans Received This Period		+ 0.00			
4. Miscellaneous Receipts This Period		+ 0.00			
5. <b>Subtotal</b> Monetary Receipts This Period (Sum 2A + 3A + 4A)		\$ 25.00			
6. In-kind Contributions Received This Period		+ 0.00			
7. <b>Total</b> All Receipts This Period (Sum 5A + 6A)		\$ 25.00			
8. <b>Total All Receipts This Election</b> (Sum 1B + 7A)			\$ 657,285.00		
<b>Expenditures</b>		A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported			\$ 391,655.71		
10. Expenditures made by cash or check this period		\$ 25,403.13			
11. In-Kind Expenditures made this period		+ 0.00			
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)		+ 0.00			
13. <b>Total</b> All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)		\$ 25,403.13			
14. <b>Total Expenditures This Election</b> (Sum 9B + 13A)			\$ 417,058.84		
<b>Contributions Made</b>		A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported			\$ 0.00		
16. All Contributions Made This Period (25A or 25B of CD3)		A 0.00	← Cash/Check		
		B 0.00	← Credit Card		
17. All In-Kind Contributions Made This Period		+ 0.00			
18. <b>Total</b> Contributions Made This Period (Sum 16A + 17A)		\$ 0.00			
19. <b>Total All Contributions Made This Election</b> (Sum 15B + 18A)			\$ 0.00		
<b>Other Disbursements</b>		A. This Period	B. This Calendar Yr or Election Cycle		
20. Funds Used For Paying Loans This Period Including Credit Card Payments		+ 0.00			
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)		+ 0.00			
22. Any Miscellaneous Disbursement Not Reported Elsewhere		+ 0.00			
23. <b>Total Other Disbursements This Period</b> (Sum 20A + 21A + 22A)		\$ 0.00			
				<b>Money On Hand</b>	
				24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 259,744.44
				25. Monetary Receipts this Period (From Item 5 - this page)	+ 25.00
				26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23) a) Disbursements By Check \$ 25,403.13 b) Disbursements By Cash \$ 0.00	- 25,403.13
				27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 234,366.31
				<b>Indebtedness</b>	
				28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
				29. Loans Received This Period	+ 0.00
				30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 0.00
				B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
				31. Payments Made on Loans This Period	- 0.00
				32. Debt Forgiven on Loans This Period	- 0.00
				33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
				34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 0.00



**MISSOURI ETHICS COMMISSION**  
**CONTRIBUTIONS AND LOANS RECEIVED**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE CITIZENS FOR A STRONGER ST LOUIS		2. REPORT DATE 4/15/2011	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$	0.00
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+	\$ 0.00
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$	0.00
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS		\$	0.00
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>IN-KIND</b> CONTRIBUTIONS		\$	0.00
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$	0.00
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$	0.00
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$	25.00
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$	0.00
C. LOANS RECEIVED		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
15. NAME AND ADDRESS OF LENDER			
NAME: ADDRESS: CITY / STATE:			\$
NAME: ADDRESS: CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$	0.00
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$	0.00
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$	0.00
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$	0.00
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$	25.00
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$	25.00



**MISSOURI ETHICS COMMISSION**  
**EXPENDITURES AND CONTRIBUTIONS MADE**  
 Instructions on Reverse Side

Office Use Only

1. Name of Committee CITIZENS FOR A STRONGER ST LOUIS		2. Report Date 4/15/2011	
<b>A. Expenditures of \$100 or Less by Category</b> (List Payments to Campaign Workers in Section B Below)			4. Amount Paid or Incurred This Period
3. Category of Expenditure Bank Fees			0.99
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.99
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 0.00
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 0.99
<b>B. Itemized Expenditures All Over \$100</b> And All Payments To Campaign Workers		9. Date	10. Purpose - (If Payment was to a Campaign Worker, Show Aggregate Paid)
8. Name and Address of Recipient			11. Amount This Period
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address: View Supplemental Form(s)			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
12. Subtotal: This Page ( Sum Column 11)			\$ 0.00
13. Subtotal: Any Attached Pages			+ 25,402.14
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 25,402.14
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 25,403.13
16. Amount of Line 15 Above which was Paid Out This Period			\$ 25,403.13
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 0.00
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attach Form CD1B - amount goes to Line 5 / Part II)			\$ 0.00
<b>C. Contributions Made (Regardless of Amount)</b>		21. Date	22. Amount
20. Name and Address of Candidate or Committee			
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
23. Subtotal: This Page (Sum Column 22)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 0.00
		B. By Credit Card	\$ 0.00
26. If Committee Made Any Loans This Period, List Amount			\$
27. Total: All Monetary Contributions and Loans Made This Period (Sum 25 + 26)			\$ 0.00
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



**MISSOURI ETHICS COMMISSION**  
**ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM**

OFFICE USE ONLY

NAME OF COMMITTEE CITIZENS FOR A STRONGER ST LOUIS		REPORT DATE 4/15/2011	
<b>ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS</b>			
NAME AND ADDRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME: Mary Ellen Ponder ADDRESS: 5909 S. Kingshighway CITY/STATE: St. Louis MO 63109	3/27/2011	expense reimbursement \$	\$ 987.47 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Gold Communications, Inc. ADDRESS: 1617 W 6th Street CITY/STATE: Austin TX 78703	3/29/2011	direct mail \$	\$ 11,274.18 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Jamilah Nasheed ADDRESS: 4710 Lee Avenue CITY/STATE: St. Louis MO 63115	3/30/2011	strategic campaign oversight \$	\$ 5,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Clare Gates ADDRESS: 817 Russell Blvd. CITY/STATE: St. Louis MO 63104	3/30/2011	operations oversight \$	\$ 2,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Bradley Ketcher ADDRESS: 28 Plant Avenue CITY/STATE: St. Louis MO 63119	3/30/2011	legal services \$	\$ 4,000.00 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Payroll1 ADDRESS: 425 North New Ballas Road CITY/STATE: St. Louis MO 63141	3/30/2011	payroll taxes, including earnings tax \$	\$ 2,140.49 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --